
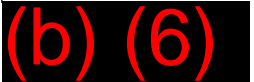





WEEKLY CERTIFIED PAYROLL REPORTING FORM

NAME OF CONTRACTOR :Scaffold Resources, LLC {sub-tier to Progress Environmental} Subcontractor to Progress Environmental, LLC										CONTRACTOR'S LICENSE No. 301-924-7223 SPECIALTY LICENSE No.										ADDRESS : 9513 Lanham Severn Road , Lanham, MD 20706 PHONE: 301-924-7223 EMAIL: dford@scaffoldresource.com										PROJECT LOCATION/ CODE / NAME : Washington, DC / 46126400 / Trump Hotel													
PAYROLL No. 1					FOR WEEK ENDING: 02/14/2015 SUBMITTED ON: Februarv 23. 2015					MOTOR CARRIER PERMIT No.					UNION Non-Union					SELF-INSURED CERTIFICATE No. WORKERS' COMP. POLICY :					WAGE DECISION: DC 130002 7/05/2013																		
NAME, ADDRESS, SSN, DRIVER'S LICENSE, ETHNICITY, GENDER					WORK CLASSIFICATION, LOCATION AND TYPE					HOURS WORKED EACH DAY					TOTAL HOURS		BASE HOURLY RATE		GROSS AMOUNT EARNED		DEDUCTION . CONTRIBUTION AND PAYMENTS										NET WGS PAID FOR WEEK		CHECK No.										
CANTLER, JAMES 					LABO0657-015 / LABORER: Skilled / Type: Building					2/8/15 2/9/15 2/10/15 2/11/15 2/12/15 2/13/15 2/14/15					TOTAL HOURS THIS PROJECT		BASE HOURLY RATE OF PAY		THIS PROJECT		ALL PROJECTS		Federal Tax		Social Security		Medicare		State Tax		Local Taxes / SDI		Other		Savings		Total Deduction		Check No.				
										121.35		75.14		17.57									40.89		27.55		220.21		0.00		\$502.71		2409125										
										Vac/Dues		Trav. Subs.		Health & Welfare									Pension		Vacation Holiday		Training		All Other		Total Fringes Paid to 3rd		Net Paid Week										
										0.00		0.00		\$0.00									\$0.00		\$0.00		\$0.00		\$109.28		109.28		957.29										
All or Part of Fringes Paid to Employee: NO										Vacation, Holiday and Dues in Gross Pay: NO										Rate in Lieu of Fringes:		Total in Lieu of Fringes		Total Base Rate + Fringes		Voluntary Pension		Voluntary Medical		H & W Rate		Pension Rate		Vac Hol Rate		Training Rate		All Other Rate		Total Fringe Rate to 3rd			
																				\$0.00		0.00		38.83		0.00		0.00		0.00		0.00		0.00		6.83		6.83					

OTHER DEDUCTION NOTES:401K 128.00, ACC 4.59, CRI 10.57, DEN 7.85, OPMED 68.05, VIS 1.15

COOKSON, JAMES 										LABO0657-015 / LABORER: Skilled / Type: Building					2/8/15 2/9/15 2/10/15 2/11/15 2/12/15 2/13/15 2/14/15					TOTAL HOURS THIS PROJECT		BASE HOURLY RATE OF PAY		THIS PROJECT		ALL PROJECTS		Federal Tax		Social Security		Medicare		State Tax		Local Taxes / SDI		Other		Savings		Total Deduction		Check No.	
104.35		53.45		12.50		40.27		0.00							0.00		0.00		\$210.57									2409134																	
Vac/Dues		Trav. Subs.		Health & Welfare		Pension		Vacation Holiday							Training		All Other		Total Fringes Paid to 3rd									Net Paid Week																	
0.00		0.00		\$0.00		\$0.00		\$0.00							\$0.00		\$54.64		54.64									651.56																	
All or Part of Fringes Paid to Employee: NO										Vacation, Holiday and Dues in Gross Pay: NO										Rate in Lieu of Fringes:		Total in Lieu of Fringes		Total Base Rate + Fringes		Voluntary Pension		Voluntary Medical		H & W Rate		Pension Rate		Vac Hol Rate		Training Rate		All Other Rate		Total Fringe Rate to 3rd					
																				\$0.00		0.00		28.09		0.00		0.00		0.00		0.00		0.00		6.83		6.83							

DREXEL, MICHAEL 										LABO0657-015 / LABORER: Skilled / Type: Building					2/8/15 2/9/15 2/10/15 2/11/15 2/12/15 2/13/15 2/14/15					TOTAL HOURS THIS PROJECT		BASE HOURLY RATE OF PAY		THIS PROJECT		ALL PROJECTS		Federal Tax		Social Security		Medicare		State Tax		Local Taxes / SDI		Other		Savings		Total Deduction		Check No.	
184.08		73.23		17.12		59.64		0.00							70.17		0.00		\$404.24									2409138																	
Vac/Dues		Trav. Subs.		Health & Welfare		Pension		Vacation Holiday							Training		All Other		Total Fringes Paid to 3rd									Net Paid Week																	
0.00		0.00		\$0.00		\$0.00		\$0.00							\$0.00		\$54.64		54.64									959.51																	
All or Part of Fringes Paid to Employee: NO										Vacation, Holiday and Dues in Gross Pay: NO										Rate in Lieu of Fringes:		Total in Lieu of Fringes		Total Base Rate + Fringes		Voluntary Pension		Voluntary Medical		H & W Rate		Pension Rate		Vac Hol Rate		Training Rate		All Other Rate		Total Fringe Rate to 3rd					
																				\$0.00		0.00		36.83		0.00		0.00		0.00		0.00		0.00		6.83		6.83							

OTHER DEDUCTION NOTES:ACC 3.78, CRI 1.12, DEN 7.85, LIF-W 3.54, OPMED 52.73, VIS 1.15

<div>BERRY, RICHARD</div> <div>(b) (6)</div>		EXEMPT	LABO0657-015 / LABORER: Skilled / Type: Building									TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.						
						2/8/15	2/9/15	2/10/15	2/11/15	2/12/15	2/13/15					2/14/15		196.80	87.56	20.48	64.93	0.00	199.60	0.00	\$569.37	2409110				
				S					8.75	8.50									17.25	\$25.00										
				O																\$0.00										
				D																\$0.00										
All or Part of Fringes Paid to Employee: NO													Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd							
Vacation. Holiday and Dues in Gross Pay: NO																														
Voluntary Contributions in Gross Pay: NO													\$0.00	0.00	31.83	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83							

OTHER DEDUCTION NOTES:401K 103.47, ACC 3.78, CRI 4.51, DEN 7.85, LIF-T 5.06, LIF-W 7.95, OPMED 65.83, VIS 1.15

MC KINNEY, RONALD		EXEMPT	LABO0657-015 / LABORER: Skilled / Type: Building									TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.											
(b) (6)				S	M	T	W	TH	F	S	8.75					\$26.00	197.80	74.96	17.53	83.00	0.00	146.38	0.00	\$519.67	2409195										
	S						8.75										Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Paid Week										
	O															\$0.00	0.00	0.00	\$0.00	\$0.00	\$0.00	\$59.76	59.76	787.33											
	D															\$0.00																			
All or Part of Fringes Paid to Employee: NO												Vacation, Holiday and Dues in Gross Pay: NO												Rate in Lieu of Fringes	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd	
Voluntary Contributions in Gross Pay: NO													\$0.00	0.00	32.83	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83												

OTHER DEDUCTION NOTES:401K 50.00, 401K2 35.15, 401L 26.44, ACC 3.78, CRI 4.51, DEN 7.85, LIF-T 7.65, LIF-W 11.00

COLLINS, SHERMON		EXEMPT	LABO0657-015 / LABORER: Skilled / Type: Building									TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.												
<div>(b) (6)</div>				S	M	T	W	TH	F	S							24.50	\$25.00	166.90	60.48	14.14	0.00	0.00	112.52	0.00	\$354.04	2409132									
	S						8.75	8.50	7.25										Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Paid Week									
	O								0.75								0.75	\$37.50																		
	D																	\$0.00		0.00	0.00	\$0.00	\$0.00	\$0.00	\$172.46	172.46	674.09									
All or Part of Fringes Paid to Employee: NO												Vacation, Holiday and Dues in Gross Pay: NO													Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd	
Voluntary Contributions in Gross Pay: NO													\$0.00	0.00	31.83	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83													

OTHER DEDUCTION NOTES:401K 40.00, ACC 3.78, CRI 1.56, DEN 7.85, LIF-W 6.60, OPMED 52.73

TOTAL STANDARD HOURS :	81.00	TOTAL 1.5 OT HOURS:	2.25	TOTAL 2.0 OT HOURS:	0.00	GRAND TOTAL HOURS:	83.25
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Statement of Compliance

Date **Monday, February 23, 2015**

I, **Darlene Ford, Payroll Manager** do hereby state:

(1) That I pay or supervise the payment of the persons employed by SCAFFOLD RESOURCES, LLC {SUB-TIER TO PROGRESS ENVIRONMENTAL} on the TRUMP HOTEL; that during the payroll period commencing on 2/8/2015 and ending on 2/14/2015 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said SCAFFOLD RESOURCES, LLC {SUB-TIER TO PROGRESS ENVIRONMENTAL} from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below: All comments are in the notes on the submitted Certified Payroll Report.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS

[X] - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

[] - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS:

EXCEPTION (CRAFT)	EXPLANATION
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REMARKS:

NAME: Darlene Ford

TITLE: Payroll Manager

Electronic Signature Code: (b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Other Deductions Notes

<u>Employee Name</u>	<u>Craft</u>	<u>Classification</u>	<u>Other Deduction Notes</u>
BERRY, RICHARD	LABO0657-015	LABORER: Skilled	401K 103.47, ACC 3.78, CRI 4.51, DEN 7.85, LIF-T 5.06, LIF-W 7.95, OPMED 65.83, VIS 1.15
CANTLER, JAMES	LABO0657-015	LABORER: Skilled	401K 128.00, ACC 4.59, CRI 10.57, DEN 7.85, OPMED 68.05, VIS 1.15
COLLINS, SHERMON	LABO0657-015	LABORER: Skilled	401K 40.00, ACC 3.78, CRI 1.56, DEN 7.85, LIF-W 6.60, OPMED 52.73
DREXEL, MICHAEL	LABO0657-015	LABORER: Skilled	ACC 3.78, CRI 1.12, DEN 7.85, LIF-W 3.54, OPMED 52.73, VIS 1.15
MC KINNEY, RONALD	LABO0657-015	LABORER: Skilled	401K 50.00, 401K2 35.15, 401L 26.44, ACC 3.78, CRI 4.51, DEN 7.85, LIF-T 7.65, LIF-W 11.00